



## Memorandum

To: Community Services Regional Directors  
Community Services Program Managers

From: Carol Y. Sloan  
Section Manager  
Regional and Local Services

Subject: CBA and MDCP Referrals for Medicaid Waiver Coverage to Medicaid for the Elderly and People with Disabilities Involving Assessment of Category 02 and MA Coverage-Type Medicaid Recipients

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CSPO 11-12-010

Effective Date: January 10, 2012

This policy clarification applies to the Community Based Alternatives (CBA) program and the Medically Dependent Children Program (MDCP).

This document provides instruction to case managers on how to handle requests for CBA/MDCP services when the applicant has:

- Category 02 coverage in the System for Applications, Verifications, Eligibility, Reports and Referral (SAVERR); or
- MA coverage-type Medicaid in the Texas Integrated Eligibility Redesign System (TIERS).

Medicaid Program Actions, which appears as Appendix XVII of the *Case Manager Community Based Alternatives Handbook* and Appendix XV of the *Case Manager Medically Dependent Children Program*, states program transfers are unnecessary for most Medicaid recipients in order to achieve payment of Medicaid Waiver services. As a result, Medicaid for the Elderly and People with Disabilities (MEPD) staff have been instructed to decline requests for program transfers to Medicaid Waiver coverage for any recipients who already have full Medicaid coverage.

However, the 1915(c) Medicaid waiver specifies that only Category 01, 03, and 04 Medicaid recipients qualify for CBA/MDCP. Therefore, the policy in Appendix XVII does not apply to applicants receiving Category 02 or MA coverage-type Medicaid services. Category 02 and MA coverage-type applicants may only receive CBA/MDCP services after a program transfer to Medicaid Waivers is completed by MEPD.

In order to accomplish this, completion of a Form H1200, Application for Assistance – Your Texas Benefits, must be sent to the applicant and the completed application

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forwarded to MEPD for processing. The case manager must also send an e-mail to [gay.smauley@hhsc.state.tx.us](mailto:gay.smauley@hhsc.state.tx.us) and [aldonna.kroeker@hhsc.state.tx.us](mailto:aldonna.kroeker@hhsc.state.tx.us) that includes the:

- applicant's name;
- applicant's Medicaid number;
- individual has coverage type 02/MA coverage-type Medicaid, which will require a program transfer; and
- case manager's name and phone number.

MEPD will make the necessary changes to Category 02/MA coverage-type Medicaid recipients to qualify for CBA/MDCP.

Identification of Category 02/MA Coverage-Type Medicaid Cases

The case manager can check SAVERR or TIERS to determine an applicant's category or coverage type, as shown below:

In SAVERR, the current category type can be located in Client Screen 1.

```
KEY: █
CLIENT SCREEN 1 -ENTER "C" & LINE # SCR=1,2,3,4,6,7,A,B,C,E,G,T PG
CLIENT NUM 50-----E-----BD 11/06/961 SF R3 CNTY
CASE-NUM TC S S-I-G W CLI-CERT SSN SSCN - - -
C1 1 4 0 04/05/10 SSMS N ALIAS SMIB-ACTION
C2 1 1 8 05/03/10 RFUG 00 ALIEN RT SMIB
C3 INS-SUB-DT COV TP OPEN SEE #7 CLOS
C4 10/30/10 02R 55 05/01/10
C5 LAST-MED TYPE 02R 07 05/01/09 04/30/1
C6 05/03/10 1 02R 55 06/01/07 04/30/0
SSMS-DT ED 02R 55 04/01/06 05/31/0
FTL DISQ A TW FLAG LTC FLAG 12/15/89 8 HI
```

In TIERS, the coverage type on the Search/Summary Screen is displayed with the preface of "MA."

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Search/Summary

Change Password Logout

Case/Application - Search/Summary

Case/Application/EDG Search Criteria

Case/Application #:

EDG #:

Reset

Search

|                          |                  |            |            |            |            |
|--------------------------|------------------|------------|------------|------------|------------|
| FS - PA                  | Approved         | 09/02/2004 | 03/24/2005 | 12/01/2004 | 12/31/2004 |
| FS - PA                  | Approved         | 09/02/2004 | 04/04/2005 | 11/01/2004 | 11/30/2004 |
| FS - PA                  | Approved         | 09/02/2004 | 03/20/2005 | 10/01/2004 | 10/31/2004 |
| MA - TANF Level Families | Denied           | 09/02/2004 | 12/04/2005 | 01/01/2006 |            |
| FS - NPA                 | Approved         | 09/02/2004 | 03/30/2009 | 03/01/2009 | 03/31/2009 |
| FS - NPA                 | Approved         | 09/02/2004 | 03/01/2009 | 02/01/2009 | 02/28/2009 |
| FS - NPA                 | Approved         | 09/02/2004 | 01/25/2009 | 01/01/2009 | 01/31/2009 |
| FS - NPA                 | Approved         | 09/02/2004 | 12/26/2008 | 12/01/2008 | 12/31/2008 |
| FS - NPA                 | Approved         | 09/02/2004 | 10/26/2008 | 11/01/2008 | 11/30/2008 |
| FS - NPA                 | Approved         | 09/02/2004 | 10/26/2008 | 10/01/2008 | 10/31/2008 |
| FS - NPA                 | Approved         | 09/02/2004 | 09/29/2008 | 09/01/2008 | 09/30/2008 |
| FS - NPA                 | Approved         | 09/02/2004 | 08/24/2008 | 08/01/2008 | 08/31/2008 |
| FS - NPA                 | Approved         | 09/02/2004 | 09/05/2008 | 07/01/2008 | 07/31/2008 |
| FS - NPA                 | Approved         | 09/02/2004 | 07/25/2008 | 06/06/2008 | 06/30/2008 |
| FS - NPA                 | Denied (ongoing) | 09/02/2004 | 05/01/2008 | 05/01/2008 | 05/31/2008 |
| FS - NPA                 | Approved         | 09/02/2004 | 04/25/2008 | 04/01/2008 |            |
| FS - NPA                 | Approved         | 09/02/2004 | 03/31/2008 | 03/01/2008 | 03/31/2008 |
| FS - NPA                 | Approved         | 09/02/2004 | 01/20/2008 | 02/01/2008 | 02/29/2008 |
| FS - NPA                 | Approved         | 09/02/2004 | 01/16/2008 | 01/01/2008 | 01/31/2008 |
| FS - NPA                 | Approved         | 09/02/2004 | 01/04/2008 | 12/01/2007 | 12/31/2007 |
| FS - NPA                 | Approved         | 09/02/2004 | 01/04/2008 | 11/01/2007 | 11/30/2007 |

If you have any questions regarding this memorandum, your regional representative may contact Beverly Garrett at 512-438-3110.

CYS:lao